LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619) Page of Page(s)
THIS SPACE FOR OFFICE USE ONLY

07 FEB -6 PM 4: 22

STATE OF IDAHO

			early in black ink) at bottom of page										
Lobbyist's name and permanent business address							Date prepared				Period covered		
Anthony J. Poinelli										month ending			
700 West Washington						2/2/07				(Mo.)	(Day)	(Yr.)	
Boise	, Idaho 83	3702								1	31	07	
						<u> </u>				<u> </u>			
Item 1	Totals	of all reportab	le expenditures made or	incurred b	y Lobbyis	st or by	y Lobbyist's Emplo	yer on l	behalf of	Lobby	ist's Employ	yer.	
Category of Expenditure Reimbursed Personal Living and Travel * Total Amount for Item 3, at bottom							nounts contributed by each employer (Identify employers, under						
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			All Employers						ployer No. 3 Employer No. 4			- NI 4	
		e Keportea		Emplo	yer No. 1		Employer No. 2	Emp	loyer No.	3	Employe	r No. 4	
Entertainment Food and Refreshment			\$0.00	s	0.00) \$	0.00	\$		_	\$		
Living	Accommoda	ations				_ _				_			
Adverti	sing												
Travel						_ -						-	
Tolonka						- -				-			
Telepho	ме					- -				<u> </u>			
Other E	expenses or	Services				_				_			
		Total	\$ 0.00	•	0.00		0.00	•	0.0	00	•	0.00	
4.0				"		- "		,		_	—		
Item			you are reporting for requi							ld be e	ntered on Pag	ge 1.	
2	Date	s of each expenditure of more than fifty dollars Place			Amo	_	Names of Legislators & Pub				cials in Grou	p	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		_										
							1						
<u> </u>	Continued on	attached page(s)				Item	En) Nama(s)	and A d	dragg(ag)		
		INST	RUCTIONS		⊢	3	Eu	ipioyer(s) Name(s) a	and Au	iress(es)		
Who should file this forms Any Johnston and and a Control						_{No.1} Idaho Association of Counties							
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code.						P.O. Box 1623, Boise, Idaho 83701							
						No.2 Idaho Public Health Districts c/o Carol Moehrle							
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.						215 10th Street, Lewiston, Idaho 83501							
TO BE FILED WITH:													
Ben Ysursa						lo.3							
Secretary of State											,,		
PO Box 83720 Boise, ID 83720-0080						o.4							

Phone: (208) 334-2852 Fax: (208) 334-2282

ltem 4				rist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible tor, or for or on behalf of any legislator.								
	Date		Amount		Name of Legislator Receiving or Benefited							
ltem				tion, the number of the Senate		LEGISLATIVE SUE	JECT	IDENTIFICATION				
5	1			r legislative activity in which		Sult to a		flight				
Subject (from	Code	Bill, Re Legislat	vas supporting or of esolution or Other tive Ident. Number ease see ched page	Appropriation Bill Number	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, municipal Government, special districts Government, state	Code 17 18 19 20 21 22 23 24 25 26 27 28 29 30	Subject Itealth service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)				

CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idahe Code.

Huthory Joinell 2-3-07
Lobbyist signature Date

LOBBYIST MONTHLY REPORT FORM (L-3) ATTACHMENT TO IDAHO ASSOCIATION OF COUNTIES REPORT FOR THE MONTH ENDING JANUARY 31

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